901.								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003 09/814 099												9	
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMAL		YTTY	OR	OTHER		
TC	OTAL CLAIMS						RA	ΓE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASK	FEE	375.00	OR	BASIC FEE	750.00	
TC	TAL CHARGE	BLE CLAIMS	minus 20=		•		X\$	9=		OR	X\$18=		
	EPENDENT C			inus 3 =	•		X4:	X42=		OR	X84=		
ML	ILTIPLE DEPEN	IDENT CLAIM P	RESENT					+140=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2								AL		OR	TOTAL		
O8 127/07 CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								LL I	ENTITY	OR	OTHER SMALL		
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO	EST BER BUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 13	Minus	. 2	-0		X\$	9=		OR	X\$18=		
	Independent	* 1)	Minus	PENDENT	CLAIM		X42	?=		OR	X84≈		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								0=		OR	+280=	7	
(Column 1) (Column 2) (Column 3)							ADDIT.	TAL FEE		OR	TOTAL ADDIT, FEE		
AMENDMENT B	,	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID I	est Ber Dusly	PRESENT EXTRA	RAT	Ē	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	· 13	Minus	"21	<u>)</u>	= /	X\$ 9	}=		OR	X\$18≖		
	Independent FIRST PRESE	NTATION OF MI	Minus	PENDENT	CLAIM.	-/-	X42	=		OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM)=		0R	+280=		
	,						ADDIT.	TAL FEE		OR	TOTAL ADDIT, FEE		
		(Column 1)		(Colun		(Column 3)							
AMENDMENT C		CLAIMS REMAINING AFTER AMENOMENT		HIGH NUME PREVIO PAID I	BER	PRESENT EXTRA	RAT	ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	49		*	X\$ 9	_		OR	X\$18=		
	Independent	•	Minus	***		-	X42	┪		OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											+280= TOTAL ODIT, FEE		
	num rignesi Num The "Highesi Num	mber Previously Pai ber Previously Pai	ud For IN THI d For (Total o	s space is independe	i less tha ni) is the	n 3, enter "3," : highest number			ropriate box				
FORM	PTO-ITS (Pay 12	(02) U.S. Go			***		Ontard and T	- 4-			AOTMENT OF		

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